

Return with application to:
Washington State Department of Health
Office of Community and Rural Health
310 Israel Road SE
MS: 47834
Tumwater. WA 98501

# J-1 Waiver Application Addendum:

## Specialist Waivers (Non-Primary Care)

Applicants (employers) submitting an application for a specialist physician must demonstrate a need for that physician specialty. Employers must meet one of the following need criteria:

- ☐ Demonstrate a need for the non-primary care specialty by addressing one of the following three need criteria:
  - (1) The physician specialty is needed to meet state or federal health care facility regulations, for example to maintain the hospital trauma designation level.
    - (a) Identify the regulation, and
    - (b) Address how the facility is currently meeting this regulation.

OR

- (2) The physician specialty is needed to address a major health problem in the facility service area.
  - (a) Identify the health problem and how this specialty will address it.
  - (b) Provide incident rates of the pathology and tie diagnosis codes to payer mix (i.e., how many patients are affected and how many are low-income or uninsured?).
  - (c) If this specialty is not available in the community, identify the nearest location where this specialty service can be obtained.

OR

- (3) The physician specialty is needed to address population-to-physician ratio because the current ratio does not meet national standards.
  - (a) Provide the population-to-physician ratio for the specialty, include source for data provided.
  - (b) Provide the number of physicians (FTE) practicing this specialty in the same health professional shortage area/facility service area.
  - (c) Provide the distance to the nearest physician practicing the same specialty.
  - (d) Describe how the demand for the specialty has been handled in the past.

Applicants must meet all of the following criteria:

### ☐ The Employer must describe the referral system that includes:

- (1) On-call sharing;
- (2) Affiliation agreements with other health care entities in the service area, specifically with publicly funded employers, such as public hospital districts, community health centers, local, state, or federal governmental institutions or correctional facilities, who have an obligation to provide care to underserved populations.

### ☐ Provide at least one letter of support for this type of physician specialty from:

- (1) A primary care provider practicing with publicly funded employers, such as public hospital districts, or
- (2) Community health centers, or
- (3) Local, state, or federal governmental institutions, or correctional facilities who have an obligation to provide care to underserved populations.

NOTE: The letter of support must be from outside of the employer's organization.

### ☐ REQUIREMENT within thirty days of the physician's start-date of employment.

The Employer must provide written notice to the Department of Health and all publicly funded providers in the health care facility's HPSA or MUA designated area. The notice must include:

- (1) The physician's name, employment start date and practice location;
- (2) Services to be provided; and
- (3) Identification of accepted patients, such as Medicaid, Medicare, or basic health plan.